

POSITION	ID NO.	DATE
CLASSIFIER	21	2/28/95
EXAMINER	300	3-10-95
TYPIST	528	5-18-95
VERIFIER	277	5-19
CORPS CORR.		
SPEC. HAND	323	3/10
FILE MAINT.		
DRAFTING		

**BEST AVAILABLE COPY**

**INDEX OF CLAIMS**

Claim	Date
1	Original
2	1/2/95
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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NOTES RE: PAPER WORKING

SYMBOLS

✗	Rejected
✓	Allowed
-	(Through number) Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
51	
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